


**BEFORE COMPLETING, READ INSTRUCTIONS ON BACK OF PART 2  
TYPE OR PRINT WITH A BALLPOINT PEN - - PRESS HARD**

| <b>AFFIDAVIT DISCLOSING CARE OR CUSTODY PROCEEDINGS</b>  |   | <b>TRIAL COURT OF MASSACHUSETTS</b>                          |  |  | <b>DOCKET NUMBER</b> |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
|--|---|--|--|---|----------------------|-----------------|------------------------|---|---|----------------------------------|-------------|-------------|-------|-------|-------------|-------------|-------|-------|-------|-------|-------------|-------|-------|-------|-------|
| Pursuant to Trial Court Rule IV  |   | Name Of Case _____   |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <input type="checkbox"/> Boston Municipal Court  | <input type="checkbox"/> District Court<br>_____<br>Division  | <input type="checkbox"/> Juvenile Court<br>_____<br>Division | <input type="checkbox"/> Probate & Family Court<br>_____<br>Division | <input type="checkbox"/> Superior Court<br>_____<br>Division                        |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 1</b>   | I, _____, hereby declare, to the best of my knowledge, information, and belief that all the information on this form is true and complete:<br><div style="text-align: center; font-size: small;">NAME OF PARTY (PRINT)</div>  |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 2</b>   | The name(s) of the child(ren) whose care or custody is at issue in this case are:<br>A. _____ (LAST, FIRST)      B. _____ (LAST, FIRST)      C. _____ (LAST, FIRST)<br>Use only the letter appearing in front of the child's name above when referring to that child in completing the remaining sections.  |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 3</b>   | The party filing this affidavit may request certain addresses to be kept confidential if the address is a shelter for battered persons and their dependent child(ren), or the party filing this affidavit believes that he/she or the child(ren) are in danger of physical or emotional abuse, or the party is filing an action under G.L.c.209A. If you believe that this provision applies to you, check the box at the right, complete sections 10 and 11 on the reverse side of this page and DO NOT complete sections 4 and 5 below. <span style="float: right;"><input type="checkbox"/></span>   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 4</b>   | The address(es) of the above-named child(ren) whose care or custody is at issue in this case are:<br><div style="display: flex; justify-content: space-between;"><div>Address(es)</div><div>Address(es) During Last 2 Years, If Different</div></div><br>CHILD A. _____<br>CHILD B. _____<br>CHILD C. _____   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 5</b>   | My address is: _____  |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 6</b>   | I <input type="checkbox"/> have <input type="checkbox"/> have not participated in and I <input type="checkbox"/> know <input type="checkbox"/> do not know of other care or custody proceedings involving the above-named child(ren) in Massachusetts or in any other state or country.   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| Certified copies of any pleadings or determinations in a care or custody proceeding outside of Massachusetts listed in sections 7 and 8 must be filed with this affidavit unless already filed with this court or an extension for filing these documents has been granted by this court.  |   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 7</b>   | The following is a list of all pending or concluded proceedings I have participated in or know of involving the care or custody of the above-named child(ren): <table border="1" style="width:100%; border-collapse: collapse; font-size: small;"><thead><tr><th>Letter of Child</th><th>Court</th><th>Docket No.</th><th>Status of Case (Custody awarded to) (Date of award)</th><th>(W)itness (P)arty (O)ther (N)one</th></tr></thead><tbody><tr><td>CHILD _____</td><td>_____</td><td>_____</td><td>_____</td><td align="center">[   ]</td></tr><tr><td>CHILD _____</td><td>_____</td><td>_____</td><td>_____</td><td align="center">[   ]</td></tr><tr><td>CHILD _____</td><td>_____</td><td>_____</td><td>_____</td><td align="center">[   ]</td></tr></tbody></table> |  |  |   |                      | Letter of Child | Court                  | Docket No.  | Status of Case (Custody awarded to) (Date of award) | (W)itness (P)arty (O)ther (N)one | CHILD _____ | _____       | _____ | _____ | [   ]       | CHILD _____ | _____ | _____ | _____ | [   ] | CHILD _____ | _____ | _____ | _____ | [   ] |
| Letter of Child  | Court   | Docket No.   | Status of Case (Custody awarded to) (Date of award)                  | (W)itness (P)arty (O)ther (N)one  |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| CHILD _____  | _____   | _____  | _____  | [   ]   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| CHILD _____  | _____   | _____  | _____  | [   ]   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| CHILD _____  | _____   | _____  | _____  | [   ]   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 8</b>   | The names and addresses of parties to care or custody proceedings involving any of the above-named child(ren) or those claiming a legal right to these child(ren) during the last two years (not including myself) are: <table border="1" style="width:100%; border-collapse: collapse; font-size: small;"><thead><tr><th>Letter of Child</th><th>Name of Party/Claimant</th><th>Current (or last known) Address of Party/Claimant</th></tr></thead><tbody><tr><td>CHILD _____</td><td>_____</td><td>_____</td></tr><tr><td>CHILD _____</td><td>_____</td><td>_____</td></tr><tr><td>CHILD _____</td><td>_____</td><td>_____</td></tr></tbody></table>  |  |  |   |                      | Letter of Child | Name of Party/Claimant | Current (or last known) Address of Party/Claimant | CHILD _____   | _____                            | _____       | CHILD _____ | _____ | _____ | CHILD _____ | _____       | _____ |       |       |       |             |       |       |       |       |
| Letter of Child  | Name of Party/Claimant  | Current (or last known) Address of Party/Claimant            |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| CHILD _____  | _____   | _____  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| CHILD _____  | _____   | _____  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| CHILD _____  | _____   | _____  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>Section 9</b>   | If the box at the right is checked, this affidavit discloses the adoption of one or more of the above-named child(ren) and I am requesting the court to impound this affidavit. See instructions. <span style="float: right;"><input type="checkbox"/></span>   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| This affidavit must be personally signed by the party listed in section 1 above, unless he/she is under 18 years of age or has been adjudged incompetent in which case the attorney of record must sign. A revised affidavit must be filed with the court if new information is discovered subsequent to this filing.                              |   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| Signed this _____ day of _____, 19____ under the penalties of perjury.   |   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <div style="display: flex; justify-content: space-between;"><div><b>X</b><br/>SIGNATURE OF PARTY OR ATTORNEY OF RECORD FOR INCOMPETENT/JUVENILE</div><div>PRINTED NAME OF PERSON SIGNING _____</div></div> <div style="text-align: center; font-size: small; margin-top: 10px;">ADDRESS OF ATTORNEY OF RECORD FOR INCOMPETENT/JUVENILE _____</div> |   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |
| <b>THE PARTY FILING THIS AFFIDAVIT MUST FURNISH A COPY OF IT TO ALL OTHER PARTIES TO THIS ACTION.</b>  |   |  |  |   |                      |                 |                        |   |   |                                  |             |             |       |       |             |             |       |       |       |       |             |       |       |       |       |

**ADDRESSES TO BE KEPT CONFIDENTIAL**

The party filing this affidavit may request certain address(es) to be kept confidential if the address is a shelter for battered persons and their dependent child(ren), **or** the party filing this affidavit believes that he/she or the child(ren) are in danger of physical or emotional abuse, **or** the party is filing an action under G.L. c. 209A. **If you checked the box in section 3 indicating that you believe the above provision applies to you, complete sections 10 and 11 below, and DO NOT complete sections 4 and 5.**

| Section 10 | The address(es) of the child(ren) listed in section 2 whose care or custody is at issue in this case are: |                       |   |
|------------|---|-----------------------|---|
|            | Child(ren)  | Address(es)           | Address(es) During Last 2 Years, If Different |
| Section 10 | Child A.  | Street Address        | Street Address                                |
|            |   | City, State, Zip Code | City, State, Zip Code                         |
|            | Child B.  | Street Address        | Street Address                                |
|            |   | City, State, Zip Code | City, State, Zip Code                         |
|            | Child C.  | Street Address        | Street Address                                |
|            |   | City, State, Zip Code | City, State, Zip Code                         |

|            |   |
|------------|---|
| Section 11 | My address is: _____<br>Street Address, City, State, Zip Code |
|------------|---|

**LIST OF ATTORNEYS AND GUARDIANS AD LITEM/INVESTIGATORS**

Please list the names of all attorneys and guardians ad litem involved in the pending proceedings listed in section 7.

- |            |                             |   |
|------------|-----------------------------|---|
| Section 12 | 1. <input type="checkbox"/> | Attorney(s) for child(ren). (Please specify if each child is represented by a different attorney.)    |
|            | <input type="checkbox"/>    |   |
|            | <input type="checkbox"/>    |   |
|            | 2. <input type="checkbox"/> | GAL(s) / Investigator(s) (Please indicate if a GAL has been appointed to represent a specific child.) |
|            | <input type="checkbox"/>    |   |
|            | <input type="checkbox"/>    |   |
|            | 3. <input type="checkbox"/> | Attorney(s) for mother.   |
|            | <input type="checkbox"/>    |   |
|            | 4. <input type="checkbox"/> | Attorney(s) for father  |
|            |                             | (Fill Out Below If Applicable)  |
|            |                             |   |
|            |                             |   |

I, \_\_\_\_\_ attorney for D.S.S. or its agent have ascertained from the above checked off attorney(s) and guardian(s) ad litem/investigators a willingness to accept an appointment from the court to represent the same party should the court elect to make such an appointment.

\_\_\_\_\_  
(Signature)

## READ BEFORE COMPLETING AFFIDAVIT

### A. WHAT IS AN "AFFIDAVIT DISCLOSING CARE OR CUSTODY PROCEEDINGS"?

It is a document signed under the penalties of perjury which lists information required by Trial Court Rule IV concerning the child(ren) involved in a care or custody proceeding.

### B. WHO MUST FILE THIS AFFIDAVIT?

The party to a petition (including a modification petition) or complaint involving the care, custody visitation, or change of name of a child pursuant to G.L. c. 119 (except delinquency actions under G.L. c. 119), G.L. c. 201, G.L. c. 207, G.L. c. 208, G.L. c. 209, G.L. c. 209A, G.L. c. 209C, G.L. c. 210, or any other provision of law concerning the care or custody of a child must file this affidavit.

This affidavit **must be signed by the party**, unless the party is under 18 years of age or has been adjudged incompetent, in which case the attorney of record must sign this affidavit on behalf of the juvenile or incompetent party.

### C. WHEN MUST THIS AFFIDAVIT BE FILED?

The person filing the petition or complaint must file this affidavit at the time of filing, and the other party must file this affidavit with the first pleading.

This affidavit should be filed upon issuance of a CHINS petition pursuant to G.L. c. 119, not upon application for such a petition.

This affidavit need not be filed if the petition or complaint is for **support only**.

### D. WHERE MUST THIS AFFIDAVIT BE FILED?

The completed affidavit must be filed, in person or by mail, with the Clerk-Magistrate or Register of Probate in the court in which this action is being brought.

### E. WHEN MUST A REVISED AFFIDAVIT BE FILED?

A revised affidavit must be filed with the Clerk-Magistrate or Register of Probate if new information is discovered subsequent to the filing of this affidavit.

### F. WHAT MUST BE FILED AS PART OF THIS AFFIDAVIT?

Certified copies of each pleading and of any determination entered in a foreign country or in a state other than Massachusetts must be filed with this affidavit unless these documents are on file with the court in this case, or an extension has been granted by the court for filing these documents.

## INSTRUCTIONS FOR COMPLETING AFFIDAVIT

When completing this affidavit if additional space is needed for any of the sections, attach a separate sheet which includes your name (printed), the docket number and the sections to which you are referring. You must also sign and date the sheet.

The party filing this affidavit **must** complete the section entitled "Name of Case" and indicate the Court Department and Division in which the case is being brought. The docket number should also be listed, if known.

### DO NOT COMPLETE SECTIONS 2, 3, 4, 8 AND 10 IF THIS AFFIDAVIT IS BEING FILED WITH A PETITION FOR ADOPTION.

**Section 1** You must print your first and last name. If this affidavit is being filed by an attorney on behalf of an incompetent person or juvenile, the name of the party on whose behalf this affidavit is being completed must be listed.

**Section 2** List the names of all child(ren) involved in this care or custody proceeding. All future references to the child(ren) listed in this section should be with the letter in front of the child's name (e.g. If John Smith is listed next to the letter A, all future references to John Smith will be as Child A).

**Section 3** Check the box if this section applies to you. If this box is checked, **do not complete Sections 4 and 5**. You must complete Sections 10 and 11 on the reverse side of page 1.

**Sections 4 & 5** List the present and all prior addresses during the last two years of the above-named child(ren) and your present address. If legal custody of a child has been awarded to a social service agency, list the name and address of the agency with legal custody.

**Section 6** Check the appropriate boxes.

**Section 7** List all pending or concluded proceedings which you have participated in or know of involving the care or custody of the child(ren) named in this affidavit. Indicate the letter of the child; the court in which the case was heard; the docket number; the person(s) to whom custody was awarded and the date of the award; and the nature of your participation in the proceeding by listing "W" for witness, "P" for party, "O" for other or "N" for none. If specific information required in this section is not known, you or your attorney should contact the court where the case was heard to obtain such information. **In the case of a petition for adoption, list all information except the person(s) to whom custody was awarded, the date of the award and the nature of your participation. Under the heading "Status of Case", indicate the type of case.**

**Section 8** List the name(s) and current residential address(es), if known, otherwise the last known address(es) of parties to care or custody proceedings or persons claiming a legal right to the above-named child(ren) during the last two years. Do not include yourself.

**Section 9** Check this box if this affidavit discloses the adoption of a child and you are requesting the court to impound this affidavit. If this provision is applicable, you should contact the Clerk-Magistrate or Register of Probate for assistance concerning the appropriate motion to be filed.

**Sections 10 & 11** **COMPLETE ONLY IF YOU CHECKED THE BOX IN SECTION 3.**

List the present and all prior addresses during the last two years of the child(ren) listed in Section 2 of this affidavit and your present address. If legal custody of a child has been awarded to a social service agency, list the name and address of the agency with legal custody.

**Section 12** List the attorneys and guardians ad litem/investigators previously appointed in the pending actions listed in Section 7.

**Signature** The party listed in Section 1 must date and sign this affidavit except for an incompetent person or juvenile, in which case the attorney of record on behalf of the juvenile or incompetent party must date and sign this affidavit and print his/her name and address.

**THIS AFFIDAVIT MUST BE FILED WITH THE COURT AND A COPY FURNISHED BY THE PARTY FILING IT TO ALL OTHER PARTIES TO THE ACTION.**